

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1/10	70571	9/28
O.I.P.E. CLASSIFIER	RD	01730	11-9-00
FORMALITY REVIEW		71476	12/23/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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APPLICANTS

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(Rev. 6/91)

Claim	Final	Original	Date
1	✓	✓	4-10-02
2	✓	✓	10-24-02
3	✓	✓	10-24-02
4	✓	✓	10-24-02
5	✓	✓	10-24-02
6	✓	✓	10-24-02
7	✓	✓	10-24-02
8	✓	✓	10-24-02
9	✓	✓	10-24-02
10	✓	✓	10-24-02
11	✓	✓	10-24-02
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13	✓	✓	10-24-02
14	✓	✓	10-24-02
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47	✓	✓	10-24-02
48	✓	✓	10-24-02
49	✓	✓	10-24-02
50	✓	✓	10-24-02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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